FORM B10 (Official Form 10) (Rev. 4/98) United States Bankruptcy Court	SOUTHERN DISTRIC	CT OF TEXAS P.O.Box	PROOF OF CLAIM			
61288, Houston TX 77208	(Houston Divi					
Name of Debtors		Case Number				
Stage Stores, Inc., a Delaware corporationSpecialty Retailers, Inc., a Texas corporationSpecialty Retailers, Inc. (NV), a Nevada corporation		00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	788-16098 Creditor ID#: United States Bankruptcy Court Southern District of Texas			
*place an "x" beside the name of the Debto against	or you are filing a claim		FILED			
Name of Creditor (The person or other entity to money or property): Daviess County Treasurer	o whom the debtor owes	Check box if you are aware that anyone else a filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	Michael N. Milby, Clerk			
Name and address where notices should be the state of the	ADC 460	Check box if you have never received any notices from the bankruptcy court in this case Check box if the address differs from the address on the envelope sent to you by the				
Introduction of the state of th	•	Check here replaces				
Account or other number by which creditor identifies debtor: $217-00751-00$		if this claim amends a previously filed claim, dated:				
1. Basis for Claim Goods sold Services performed Money loaned Personal injury/wrongful deathX Taxes Other		Retiree benefits as defined in 11 U.S.C. § 1114(a) Wages, salaries, and compensation (Fill out below) Your SS#: Unpaid compensation for services performed from to (date)				
2. Date debt was incurred: Marc	h 1, 1999	3. If court judgment, date ob	otained:			
4. Total Amount of Claim at Time Case File If all or part of your claim is secured or enti Check this box if claim includes interes additional charge	tled to priority, also complet t or other charges in additio		Attach itemized statement of all interest or			
 5. Secured Claim. — Check this box if your claim is secured by collateral (including a right of setoff). — Brief Description of Collateral: — Real Estate — Motor Vehicle — Other All personal and intangible property of Debtor's Estate Value of Collateral: \$ 		6. Unsecured Priority Claim. Check this box if you have an unsecured priority claim Amount entitled to priority \$ 2 , 9 28 . 0 9 Specify the priority of the claim: Wages, salaries, or commissions (up to \$4,300),* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3) Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4). Up to \$1,950* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6). Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. 507(a)(7).				
Amount of arrearage and other charges <u>at</u> secured claim, if any \$	time case filed included in	X Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8). Other – Specify applicable paragraph of 11 U.S.C. § 507(a). *Amounts are subject to adjustment on 4/1/98 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.				
 Credits: The amount of all payments on this the purpose of making this proof of claim. Supporting Documents: Attach copies notes, purchase orders, invoices, itemized staten court judgments, mortgages, security agreement DO NOT SEND ORIGINAL DOCUMENTS. If the explain. If the documents are voluminous, attach explain. If the documents are voluminous, attach Date-Stamped Copy: To receive an ack enclose a stamped, self-addressed envelope and 	s of supporting documents, such nents of running accounts, contacts, and evidence of perfection of documents are not available, a summary. In a summary.	n as promissory racts, f lien.	This Space Is for Court Use Only			
Date Sign and print the name and to (attach copy of power of attor $0.7-2.5-0.0$ Martin L. Mumay	360					
Penalty for presenting fraudule	ent claim: Fine of up to \$500,00	0 or imprisonment for up to 5 years, or both.	18 U.S.C. §§ 152 and 3571.			

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1999 ³ Daviess County ,Indiana PAYABLE 1st instl delq after MAY 10-fall instl delq after NOV 10 2000 C

PAYABLE 1 2000		ADD 10% PENAL	TY AFTE		JENT DATES		
DUPLICATE NUMBER	TAXING UNIT	EXEMPTION		SLE VALUE	GROSS TAX EACH JU	STATE PHOPERTY TAX CREDIT	43 NET TAX EACH INSTALLMENT
217-00751-00	CITY OF WASH.	· · · · · · · · · · · · · · · · ·		_	0.00	661.62	2928.09
00676				722 <u>30</u>	4202.49	<u>612.78</u> √	
DESCR	RIPTION FORE 753	LAND BUI	LDING	TOTAL TAX RATE	11.6364	LATE ASSESSMENT PENALTY AND INTEREST OR DELINQUENT TAX	0.00 0.00 CR 2928.09
				TREASURER. MAIL OR BRING ENCLOSE SELF ENVELOPE WH	CKS PAYABLE TO COUNTY TO TREASURER'S OFFICE. F-ADDRESSED STAMPED EN PAYING BY MAIL.	PAY THIS AMOUNT BY	
SPECIALTY RETAILERS INC. C/OHARDING & CARLSONE INC 3903 BELLAIRE BLVD. HOUSTON, TX. 77025				THIS IS A VALID BY TREASURER	RECEIPT WHEN STAMPED PAID	MAY 10 ->	0.00 2928.09
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